NOTIFICATION OF MULTICANDIDATE STATUS

01/17/2006 14:45

(See reverse side for instructions). This form should be filed after the Committee qualifies as a multicandidate committee. 1. (5) NAME OF COMMITTEE IN FULL American Academy of Family Physicians Political Action Committee [h] Number and Sheet Address-2021 Massachusetts Ave., N00 2. FEC IDENTIFICATION NUMBER C00411553 (t) Cry, State and AF Code. 3. TYPE OF COMMITTEE Ided or A ☐ STATE PARTY DC: 2003/8 Washington X OTHER Loertify that one of the following situations is correct (complete line 4 or 5): **STATUS BY AFFILIATION:** The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: FEC Identification Number: STATUS BY QUALIFICATION: 5. (a) candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Office Sought State/District Date. Name (i) Ralph Regula for Congress House OН 16 09/08/2005 (ii) PETE STARK RE-ELECTION COMMITTEE CA. 13 09/16/2005 House (iiii) Friends of Patrick Kennedy House 1 08/21/2005 (Iv) Bill Thomas Campaign Committee House CA 22 09/21/2005 (v) TIM MURPHY FOR CONGRESS 09/21/2005 House (b) Contributors: The committee received a contribution from its 51st contributor 08/01/2005 On: (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 05/13/2005 (d) Qualification: The committee met the above requirements on: 09/21/2005 I cartify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. TYPE OR PRINT NAME OF TREASURER SIGNATURE OF TREASURER DATE Electronically Filed by Randall K. Wexler, MD 01/47/2006 Randell K. Wexler, M.D. Note: Submission of false, enoneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. For further information contact: